

CHERRY STREET LOCAL

2024 NONPROFIT APPLICATION

Thank you for your interest in Cherry Street Local. The Market is operated by its parent nonprofit organization, the Miami County Local Food Council. The Miami County Local Food Council works to develop, support, and promote local farmers and producers, and to improve public health and the economy by connecting citizens with healthy local food. We look forward to a thriving market season!

Please mail your signed application to the address below. APPLICATIONS MUST BE RECEIVED BY May 19, 2024 to participate in the first market June 8, 2024. We will review your application and contact you as soon as possible. Our mailing address is:

Cherry Street Local
c/o Miami County Local Food Council
PO Box 334
Troy, OH 45373
Email: cherrystreetlocal@gmail.com
Phone: (937) 749-8803

VENDOR INFORMATION

NON-PROFIT NAME: _____

CONTACT NAME: _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

PHONE (DAY) _____ CELL _____

EMAIL _____

WEBSITE _____

What is the BEST way to contact you? ___PHONE ___EMAIL ___SNAIL MAIL

What is the best phone number to contact you for inclement weather cancelation? _____

Is your nonprofit on Facebook?

If yes, what is your Facebook location?

Do you require electrical service? ___ YES ___ NO

If yes, what is it for and what type do you need? _____

ACTIVITY TYPE (CIRCLE ALL THAT APPLY):

INFORMATION ONLY

INFORMATION

CHILDRENS ACTIVITY

ITEMS FOR SALE

ACCEPTING DONATIONS

VOLUNTEER SIGN UPS

OTHER _____

PLEASE PROVIDE A COMPLETE AND LEDGABLE DISCRPTION OF WHAT YOU WILL BE PROVIDING AT THE MARKET AND RETURN IT WITH YOUR COMPLETED APPLICATION. IF YOU ARE PROPOSING DIFFERENT THINGS ON DIFFERENT DAYS, PLEASE INDICAT THOSE WITH THE COORASpondING DATE. YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT THIS DISCRPTION. Please use a separate page if needed. We will use this information to advertise your nonprofits attendance.

Items for sale must correspond and be in line with the general aesthetic of Cherry Street Local and must be approved by the Market Manager. We do not allow resale items, third party sales platforms or garage sale type items. We do allow homemade, home grown, or home produced items. If you choose to sell any food items, they must be homemade and fall under the Cottage Food Law or be produced in a commercial kitchen and labeled accordingly.

FEES

As a nonprofit there is no fee for booth space. But you must carry insurance. Nonprofits will be assigned a spot for the day/days you attend based on availability on that day. We offer nonprofits at least one day per market season. If you would like to attend for more than one day, please indicate this here and I will contact you with availability.

Please circle the DAY or DAYS below you would like to participate. Please indicate first choice. If you are unable to attend after registering and being accepted, contact the Market Manager, Kristie Fisher (937-749-8803) at least 48 hours prior.

* Please note, the final day for Cherry Street Local will be September 28, 2024.

6/08/2024	6/15/2024	6/22/2024	6/29/2024
7/06/2024	7/13/2024	7/20/2024	7/27/2024
8/03/2024	8/10/2024	8/17/2024	8/24/2024
8/31/2024	9/07/2024	9/14/2024	9/21/2024
9/28/2024			

INSURANCE REQUIREMENT FOR NONPROFIT ORGANIZATIONS

Provide your own \$1,000,000.00 Limited Liability Insurance.

This policy certificate **MUST** show coverage dates of the Market indicated as June 2024 through September 2024.

This policy certificate **MUST** list the two Additional Insureds that follow, both A and B.

- A. The Miami County Local Food Council.
- B. The City of Troy. The City of Troy's listing must include the provided verbiage below in italics.

Provided verbiage for the City of Troy listing as additional insured, this must be on your provided proof of insurance **exactly as written**. *The City of Troy, Ohio, its elected and appointed officials, all employees, agents, volunteers, all boards, commissions and/or authorities and board members, including employees, agents, and volunteers thereof. Coverage shall be primary to the Additional Insureds and not contributing with any other insurance or similar protection available to the Additional Insureds whether other available coverage be primary, contributing, or excess.*

Items NEEDED for a complete, accepted application:

Event description Signed application Liability Insurance with additional insureds

I HAVE READ AND AGREE TO COMPLY WITH THE RULES AND REGULATIONS OF CHERRY STREET LOCAL. I UNDERSTAND FAILURE TO COMPLY WILL LIMIT OR PROHIBIT PARTICIPATION IN THE MARKET. I AFFIRM THAT ALL INFORMATION PROVIDED IS COMPLETE AND TRUE. I AGREE TO HOLD CHERRY STREET LOCAL, MIAMI COUNTY LOCAL FOOD COUNCIL AND THEIR EMPLOYEES, AGENTS AND VOLUNTEERS HARMLESS AGAINST ANY AND ALL CLAIMS, AND TO DEFEND THE MARKET AGAINST CLAIMS BROUGHT AGAINST IT DUE TO CONDUCT BY ME OR MY EMPLOYEES. I AGREE TO OBTAIN ALL LICENSES, INSURANCE AND PERMITS REQUIRED, AND TO COLLECT ANY SALES TAX AS REQUIRED BY LAW TO OPERATE AND SUPPLY SUCH TO CHERRY STREET LOCAL. CHERRY STREET LOCAL AND THE MIAMI COUNTY LOCAL FOOD COUNCIL HAS MY PERMISSION TO USE MY FARM/BUSINESS NAME/PICTURES IN PROMOTING THE MARKET.

SIGNATURE

DATE